



NEW MEXICO CORRECTIONS DEPARTMENT

Secretary
Alisha Tafoya Lucero

CD-172300 Mental Health Treatment Center: Psychiatry, Medical and Nursing Care	Issued: 2/25/09 Effective: 2/25/09	Reviewed: 1/31/20 Revised: 6/9/16
Alisha Tafoya Lucero, Cabinet Secretary		<i>Original Signed and Kept on File</i>

AUTHORITY:

Policy CD-010100
Policy CD-170000

REFERENCE:

- A. Correctional Psychiatry Practice: Guidelines and Strategies, 2007
- B. Handbook of Correctional Mental Health, 2010
- C. Psychiatric Services in Jails and Prisons, American Psychiatric Association, 2nd Edition
- D. Correctional Mental Health Care: Standards and Guidelines for Delivering Services, NCCHC, 2003
- E. Performance Based Expected Practices for Adult Correctional Institutions, ACA, 5th Edition
- F. Standards for Health Services in Prisons, NCCHC, 2008

PURPOSE:

To establish guidelines for the medical staff including psychiatry, nursing and medical operations of the Mental Health Treatment Center.

APPLICABILITY:

All employees of the New Mexico Corrections Department (NMCD) and contracted employees involved in the management or operation of the adult health services delivery system for inmates housed in state and contracted institutions, especially staff at the Mental Health Treatment Centers at CNMCF and WNMCF

FORMS:

None

ATTACHMENTS:

- A. **MHTC Forms Appendix** Attachment (*CD-172301.A*)

DEFINITIONS:

- A. MHTC (Mental Health Treatment Center): The Mental Health Treatment Center is a unit that provides acute inpatient psychiatric care, medical care and nursing care for inmates that require

in-patient psychiatric treatment and long term residential mental health treatment for inmates with serious mental illness and/or serious adaptive functioning deficits.

- B. MHTC-ACU (Mental Health Treatment Center-Acute Care Unit): The Mental Health Treatment Center-Acute Care Unit is an acute inpatient psychiatric unit that provides hospital level psychiatric care, medical care and nursing care for inmates that require in-patient Psychiatric treatment.
- C. MHTC-TRU (Mental Health Treatment Center-Treatment Restrict Unit):The Mental Health Treatment Center-Treatment Restrict Unit is designed to house MHTC inmates that require a higher degree of structure for therapeutic reasons.
- D. MHTC-CCU (Mental Health Treatment Center-Chronic Care Units): the Mental Health Treatment Center-Chronic Care Unit housing areas are designed to house MHTC inmates that that are classified as Level 1 through 4 status and provide long term residential mental health treatment for inmates with serious mental illness and/or serious adaptive functioning deficits.

POLICY:

MHTC utilizes a multi-disciplinary approach to provide emergent, intermediate and long term mental health care for inmates who are experiencing cognitive, affective and/or behavioral functioning deficits which inhibit an inmate's ability to adequately function within normal limits in regular general population housing.



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PROCEDURES:

A. MHTC-ACU (Acute Care Unit)

1. Psychiatry Physician Requirements

- a. All MHTC-ACU admissions are done via a psychiatrist to psychiatrist referral. The MHTC Psychiatrist serves as the final clinical authority regarding MHTC-ACU admissions. A **MHTC-ACU Psychiatry Referral** form #M-421 will be filled out by the referring psychiatrist on all MHTC-ACU referrals.
- b. If an MHTC-ACU referral has been made and the MHTC-ACU admission is later cancelled, the referring psychiatrist will cancel the referral and develop an alternative treatment strategy. The referring psychiatrist will indicate the patient's clinical status, special observation, psychiatry follow-up instructions and disposition if other than the MHTC.
- c. The MHTC Psychiatrist serves as the final clinical authority regarding MHTC-ACU discharges. All MHTC-ACU discharges require a Psychiatrist's order to discharge a patient from the ACU to the TRU, CCUs or any other facility.
- d. The MHTC Psychiatrist may use telepsychiatry in special cases when needed to further assess a referral being made to the MHTC-ACU.
- e. All MHTC-ACU admissions will be housed in the Acute Care Unit (ACU) for at least 24 hours.
- f. If the ACU is full, an ACU admission may be temporarily housed in the TRU until an ACU cell is available. Patients temporarily housed in the TRU will receive ACU level of care and ACU observation status. All ACU admission policies and procedures will be followed.
- g. MHTC-ACU admissions orders will be done using the **MHTC-ACU Admissions Order** form #M-422.

- h. MHTC-ACU orders for therapeutic restraints and seclusion will be done using the order forms attached to the NMCD policy, (CD-170700) **Use of Therapeutic Restraints.**
- i. The observation status of an MHTC-ACU inmate will be ordered or changed only by the admitting psychiatrist or MHTC Psychiatrist. The **MHTC-ACU Observation Status #M-420** form will be filled out by MHTC nursing staff and copy posted outside each ACU cell. The observation status designates security checks, nursing checks, inmate property, safety blanket or safety smock, inmate clothing, meals, phone calls, visits, and recreation. All inmates with suicidal ideation must be on OBS-I. The observation status levels for MHTC-ACU inmates are as follows:
 - 1) OBS I - ACU cell with 1:1 constant observation security watch and every one hour nursing checks. The 1:1 constant security observation is at all times. While in the shower room, 1:1 constant, in-person, security observation is required.
 - 2) OBS II - ACU cell with every 30 minute security checks and every 4 hour nursing checks
- j. The MHTC Psychiatrist will complete a psychiatric interview, history and mental status exam on all new admissions within (24) hours of admission including weekends and holidays.
- k. The minimum psychiatry follow-up visit requirements for the MHTC-ACU consists of daily inmate psychiatry rounds. The MHTC psychiatrist will do more frequent MHTC-ACU inpatient psychiatry rounds when clinically necessary.
- l. The minimum psychiatrist medical record documentation requirements for patients in the MHTC-ACU is as follows:
 - 1) A psychiatric history, mental status exam, assessment and treatment plan is done for all MHTC-ACU admissions within 24 hours of admission using the **Psychiatric Assessment** form #M-108.
 - 2) A MHTC-ACU Psychiatry discharge summary is done for every MHTC-ACU discharge out of the MHTC-ACU using the **MHTC-ACU Psychiatry Discharge Summary** form #M-413.
 - 3) Psychiatrist progress notes in the MHTC-ACU will be completed using the **Psychiatric Encounter** form #M-401 **and additional notes if needed using form Psychiatric Encounter Continuation** #M-402.

- 4) The required minimum frequency of Psychiatrist MHTC-ACU progress note documentation is as follows:
 - a) A progress note each day for the first 3 days after admission to ACU.
 - b) A progress note each week for the next 8 weeks.
 - c) A progress note each month after that.

- 5) Other required minimum Psychiatrist MHTC-ACU progress note documentation is as follows:
 - a) Progress notes daily for anyone on any form of watch.
 - b) Progress notes for any significant change in mental status, clinical status, or medications.
 - c) Progress notes for any use of involuntary psychiatric medications.
 - d) Progress notes for therapeutic restraints and seclusion will be done in accordance with NMCD policy, (*CD-170700*) **Use of Therapeutic Restraints**.

2. Nursing Requirements

- a. Nursing staff will complete the following for each MHTC-ACU admission:
 - 1) Carry out psychiatric admission orders including medication orders, observation status, property restrictions, and housing requirements.
 - 2) Contact the referring psychiatrist as needed.
 - 3) Fill out the **MHTC-ACU Observation Status** #M-420 and inform MHTC security staff of the inmate's observation status.
 - 4) MHTC nursing staff will complete the **MHTC-ACU Nursing Admission Assessment** #M-419 form which includes a review of current medications, chronic conditions and mental status.

- b. The MHTC-ACU, nursing staff will complete the following nursing duties:
 - 1) **MHTC Daily Nursing Assessment/Plan of Care** #M-423 form- is completed on admission and completed every shift thereafter.
 - 2) **MHTC Nursing Observation Checklist** form #M-416 to document nursing observation on the nursing checklist form after each nursing check. The frequency of nursing checks is determined by the inmate's observation status.
 - a) OBS I - every 1 hour nursing checks
 - b) OBS II - every 4 hour nursing checks

- c. Additional nursing requirements will include:

- 1) A face-to-face nursing shift change report for each nursing shift change is required.
 - 2) Complete therapeutic restraint and seclusion nursing assessment forms according to NMCD policy, (*CD-170700*) **Use of Therapeutic Restraints.**
- d. MHTC-ACU morning report.
- 1) MHTC nursing staff will provide a morning report seven days a week to the MHTC Psychiatrist, mental health and security staff.
 - 2) Any significant incidents or events overnight in the MHTC-ACU, MHTC-TRU and MHTC-CCUs will be discussed in the morning report.

B. MHTC Residential Housing Units -The MHTC Residential Housing Units include the MHTC-TRU (Treatment Restrict Unit) and MHTC-CCUs (Chronic Care Units).

1. Psychiatry Physician Requirements

- a. All inmates in the MHTC residential housing units (TRU and CCUs) will be enrolled in the Psychiatry Chronic Care Clinic.
- b. A psychiatry chronic care clinic data base and appointment scheduling process will be maintained for all inmates housed in the MHTC residential housing units (TRU and CCUs).
- c. The **Psychiatric Encounter** form #M-401 will be completed for all Psychiatrist progress notes in the MHTC residential housing units (TRU and CCUs).
- d. There are minimum psychiatry chronic care clinic follow-up visit requirements for the MHTC residential housing units. The MHTC Psychiatrist will do follow-up visits more often when clinically necessary. The minimum psychiatry chronic care clinic follow-up visit requirement is as follows:
 - 1) MHTC-TRU unit (B Pod): psychiatry follow-up visits at least every 30 days
 - 2) MHTC-CCU units: psychiatry follow-up visits at least every 60 days

2. Nursing requirements. There are minimum requirements for nursing checks in the MHTC Residential Housing Units. The MHTC nursing staff will do follow-up visits more often when the clinical situation requires it. The minimum requirement for nursing checks in the MHTC Residential Housing Units is as follows:

- a. MHTC-TRU unit (B Pod): Nursing wellness checks will be performed at least once per day and during sick call requests. Since the MHTC-TRU unit (B Pod) serves as a special management unit, the MHTC-TRU unit (B Pod) nursing checks are documented on the **MHTC-TRU Nursing Wellness Rounds** form

#M-614A or #M-614B Additional clinically relevant MHTC-TRU unit nursing observations will be documented as a nursing progress note using the Interdisciplinary Progress Note form #M-201 in the inmate medical record.

- b. MHTC-CCU units: The MHTC-CCUs serves as the long term MHTC residential unit for non-acute patients. Nursing checks will be performed as needed when the clinical situation requires it and during sick call requests. Any clinically relevant MHTC-CCU unit nursing observations from these checks will be documented as a standard nursing progress note in the inmate medical record.

C. MHTC Treatment Planning Meetings

1. MHTC Psychiatrist and MHTC designated nursing staff will attend weekly MHTC treatment team meetings with behavioral health, security and classification staff.
2. Assessments, treatment planning and discharge planning for MHTC inmates housed in the MHTC-ACU, MHTC-TRU and MHTC-CCU units will be reviewed.
3. The MHTC Psychiatrist serves as the final clinical authority regarding MHTC-ACU discharges and TRU transfers. Assignment to CCU is based on a determination from the MHTC Treatment Team in accordance to guidelines outlined in CD-180601 *Mental Health Treatment Center (MHTC) Operations*.

D. Additional duties and responsibilities of MHTC Psychiatrist and MHTC nursing staff.

1. The MHTC Psychiatrist will conduct specialized evaluations for the use of involuntary psychiatric medications, requests for Mental Health Treatment *Guardianships and assessments for civil commitment*. These evaluations will be done in accordance with policies (CD-170900) *Involuntary Psychiatric Treatment*, (CD-172400) *Mental Health Treatment Guardian*, and (CD-172600) *Civil Commitment Procedures to the New Mexico Behavioral Health Institute*.
2. MHTC Psychiatry and nursing staff will apply and document therapeutic seclusion and therapeutic restraints in accordance with policy (CD-170700) *Use of Therapeutic Restraints*.
3. Behavioral management plans will be done in accordance with policy (CD-180300) *Management Plans for Purposeful Self-Injurious Behavior* for inmates housed in the MHTC who require a behavioral management plan. The MHTC psychiatrist will complete a **Psychiatric Management Plan Synopsis** form (CD-180301.2) in collaboration with MHTC mental health staff.
4. Nursing staff on-site are the initial contacts for crisis at MHTC after hours and on weekends. The ACU nurse will conduct and initial interview with the inmate to determine the relevancy and extent of the crisis. This interview will help determine if on-call psychiatry needs to be contacted or if further guidance is needed. If further

guidance is needed the on-call Behavioral Health clinician will be contacted for consultation as per *Mental Health Treatment Center (MHTC) Operations (CD-180601)*.

E. MHTC Medical Admission and Follow-up Care Requirements

1. The physical exam is done by a non-psychiatric physician or mid-level medical provider within twenty-four (24) hours of MHTC-ACU admission including weekends and holidays. The MHTC-ACU physical exam is documented on a standard hand written **Health Services Physical Exam** form #M-104. If a physical exam has been completed and is documented in the medical record within 30 days of MHTC-ACU admission, it need not be redone.

Place a copy in the MHTC inmate medical record. This form must be reviewed, dated and signed as noted by the admitting psychiatrist. However, if there have been significant changes to the inmate's medical condition within the past 30 days, a physical exam will be required.

2. Inmates in the MHTC enrolled in the medical chronic care clinics will follow chronic care clinic procedures outlined in policy (CD-170100), *Medical Clinical Services*.
3. Urgent and non-urgent medical consults will be ordered by the MHTC Psychiatrist.

F. MHTC Transfers

1. Inmates leaving the MHTC residential housing units (TRU and CCUs) are considered a psychiatric transfer of care. The MHTC Treatment Team will discuss potential transfers and try to reach consensus regarding when to transfer an inmate out of the MHTC residential housing units (TRU and CCUs). When the treatment team is unable to reach consensus regarding clinical recommendations or decisions, including but not limited to, diagnosis, treatment, and discharge eligibility the Behavioral Health Services Bureau Chief and the Director of Psychiatry will be consulted in order to render a final decision.
2. A MHTC TRU/CCU Psychiatry transfer summary is done for all MHTC transfers out of the MHTC-TRU (Treatment Restrict Unit) and MHTC-CCUs (Chronic Care Units) using the **MHTC CCU/TRU Psychiatry Transfer Summary** form #M-408.
3. When Discharge Planning and required paperwork has been completed, the MHTC Behavioral Health Therapist Supervisor will notify the MHTC Unit Manager the inmate can be transferred.

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MHTC FORMS APPENDIX

	FORM #	FORM TITLE	Pages
1	#M-408	MHTC CCU / TRC Psychiatry Transfer Summary	1
2	#M-413	MHTC ACU Psychiatry Discharge Summary	1
3	#M-416	MHTC ACU Nursing Observation Check List (OBSV. I and II Only)	1
4	#M-423	MHTC Daily Nursing Assessment / Plan Of Care	2
5	#M-419	MHTC Nursing Admission Assessment	2
6	#M-420	MHTC ACU Observation Status	1
7	#M-421	MHTC- ACU Psychiatry Referral Form	1
8	#M-422	MHTC ACU Admission Order Form	1
9	#M-614A	Therapeutic Restrict Unit (TRU) Nursing Wellness Rounds (January thru June)	1
10	#M-614B	Therapeutic Restrict Unit (TRU) Nursing Wellness Rounds (July thru December)	1
11	#M-401	Psychiatric Encounter	1
12	#M-402	Psychiatric Encounter Continuation Notes	1
13	#M-108	Psychiatric Assessment Form	3
14	#M-104	Health Services Physical Examination	5
15	#M-201	Interdisciplinary Progress Note	1
16.	#M-205	Medication Non-Compliance Encounter and Review	1
17.	CD-180106.1	MHTC Referral	1